



Receipt

Patent
Attorney's Docket No. 033352-007

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Eva A. Turley et al.

Application No.: 09/685,010

Filed: October 5, 2000

For: COMPOSITIONS AND METHODS FOR
TREATING CELLULAR RESPONSE TO
INJURY AND OTHER
PROLIFERATING CELL DISORDERS
REGULATED BY HYALADHERIN
AND HYALURONANS

Group Art Unit: 1615

Examiner: Not Assigned

TECH CENTER 1600-2600

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REQUEST FOR CORRECTED OFFICIAL FILING RECEIPT

Assistant Commissioner for Patents
Office of Initial Patent Examination
Customer Service Center
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Sir:

Enclosed is a copy of the Official Filing Receipt marked in red to show corrections that are needed. The corrections to the Continuing Data as Claimed by Applicant are as follows.

THIS APPLICATION IS A CIP OF 09/541,522 FILED 04/03/00
WHICH CLAIMS BENEFIT OF 60/127,457 FILED 04/01/99

Issuance of a corrected Official Filing Receipt is respectfully requested.

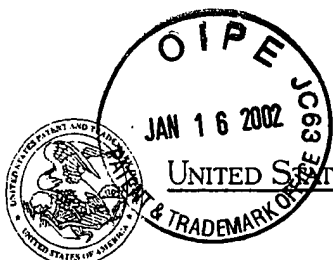
Respectfully submitted,

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Date: January 15, 2002



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DDM

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/685,010	10/05/2000	1615	0	910130.401C1	57	37	16

David D McMasters
Seed Intellectual Property Law Group PLLC
701 Fifth Ave
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Seattle, WA 98104-7092

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OC000000005655700

Date Mailed: 01/05/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Eva A. Turley, Residence Not Provided;
Tony F. Cruz, Residence Not Provided;

Continuing Data as Claimed by Applicant

09/541,522 FILED 04/03/00

THIS APPLICATION IS A CIP OF ~~08/541,522 10/10/1995 PAT 5,574,879~~~~WHICH IS A CON OF 08/252,020 06/02/1994 PAT 5,515,317~~~~AND CLAIMS BENEFIT OF 60/127,457 04/01/1999~~

WTRH

Foreign Applications

If Required, Foreign Filing License Granted 01/04/2001

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SEED INTELLECTUAL PROPERTY
LAW GROUP PLLC

Title

Compositions and methods for treating cellular response to injury and other proliferating cell disorders regulated by Hyaladherin and Hyaluronans

Preliminary Class

424

Data entry by : BRUNSON, MONIQUE

Team : OIPE

Date: 01/05/2001



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Title 37, Code of Federal Regulations, 5.11 & 5.15**

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- The docket number allows a maximum of 25 characters.
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Bib Data Sheet

CONFIRMATION NO. 5697

SERIAL NUMBER 09/685,010	FILING DATE 10/05/2000 RULE	CLASS 424	GROUP ART UNIT 1653	ATTORNEY DOCKET NO. 910130.401C1	
APPLICANTS Eva A. Turley, London, ON, CANADA; Tony F. Cruz, Toronto, ON, CANADA; ** CONTINUING DATA ***** THIS APPLICATION IS A CON OF 09/541,522 04/03/2000 ABN <i>swl</i> WHICH CLAIMS BENEFIT OF 60/127,457 04/01/1999 <i>swl</i> ** FOREIGN APPLICATIONS ***** <i>NONE swl</i> IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 01/04/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Allowance</i> Examiner's Signature <i>swl</i> Initials		STATE OR COUNTRY ON	SHEETS DRAWING 57	TOTAL CLAIMS 37	INDEPENDENT CLAIMS 16
ADDRESS 21839					
TITLE Compositions and methods for treating cellular response to injury and other proliferating cell disorders regulated by hyaladherin and hyaluronans					
FILING FEE RECEIVED 1093	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		